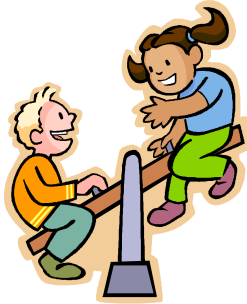




**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

## ***Dr. Gonnawannastay's***



## ***Institute of Fun!***

Missouri City Parks and Recreation is now accepting enrollment for Dr. Gonnawannastay's Institute of Fun, presented in partnership with Taking Kidz Places Transportation. Sessions are thematic and provide a host of interactive educational lessons and field trips. The camp accepts children ages 5-13 (birth certificate required; copies are acceptable) and each session lasts one week. Children will be divided into age appropriate groups.

Sessions are comprised of activities including crafts, field trips, swimming, cooking lessons, water play, foreign language, academic enrichment, and a variety of indoor/outdoor sports. Camp hours run from 8:00am-5:00pm with extended care available from 7:00am-6:00pm, Monday-Friday.

**Camp location:** Community Center, Room 210 – 1522 Texas Parkway, Missouri City, TX 77489.

**MANDATORY Parent Meeting:** A parent meeting will be held ***Wednesday, June 3<sup>rd</sup> at 6:00pm*** in the old Municipal Courtroom located at the City Hall Complex (1522 Texas Parkway). This will be your chance to meet the staff, obtain additional information, and ask any questions you may have.

Please read the attached document, **initial where required**, and complete the required forms to register.

*The program is overseen by CPR certified, experienced educators and supported by community volunteers.  
Camp ratio is 20:1.*

**[www.missouricitytx.gov](http://www.missouricitytx.gov)**

***Gonnawannalearn! Gonnawannaplay! Gonnawannastay!***



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

<b>CAMP SESSIONS</b>	<b>BEGINS</b>	<b>ENDS</b>
Session I: Fun with Food	Monday, June 8 <sup>th</sup>	Friday, June 12 <sup>th</sup>
Session II (FT): Fun with Food	Monday, June 15 <sup>th</sup>	Friday, June 19 <sup>th</sup>
Session III: Under the Sea	Monday, June 22 <sup>nd</sup>	Friday, June 26 <sup>th</sup>
Session IV (FT): Under the Sea	Monday, June 29 <sup>th</sup>	Thursday, July 2 <sup>nd</sup> (closed 7/3)
Session V: CSI	Monday, July 6 <sup>th</sup>	Friday, July 10 <sup>th</sup>
Session VI (FT): CSI	Monday, July 13 <sup>th</sup>	Friday, July 17 <sup>th</sup>
Session VII: Around the World	Monday, July 20 <sup>th</sup>	Friday, July 24 <sup>th</sup>
Session VIII (FT): Around the World	Monday, July 27 <sup>th</sup>	Friday, July 31 <sup>st</sup>
Session IX: Great Debaters	Monday, August 3 <sup>rd</sup>	Friday, August 7 <sup>th</sup>
Session X (FT): Great Debaters	Monday, August 10 <sup>th</sup>	Friday, August 14 <sup>th</sup>

\*Minimum pre-registration of 10 participants in order to hold session.\*FT = Field Trip

**Fees**

Fees listed are per week. Even numbered camp session rates are higher due to field trips. Every two weeks the camp will attend an off-site event, activity, program, or attraction. The sibling discount is applied **only** if you have more than one child registered in the same camp session. The discount is the same regardless of how many siblings are enrolled. Scholarships are not available. Spaces cannot be held therefore payment is due on deadline dates listed below. Daily discounts do not apply. Fees are non-negotiable. There is a one-time registration camp fee, per child. A late fee, per child applies for those that pay after the registration deadline.

Parent's Initial: \_\_\_\_\_

**ONE-TIME REGISTRATION FEE = \$50.00, plus the following for Sessions I, III, V, VII, IX:**

<b>Regular Camp 8am-5pm</b>	<b>Extended Day 7am-6pm</b>	<b>Sibling Regular Camp 8am-5pm</b>	<b>Sibling Extended Day 7am-6pm</b>
\$85.00 per week	\$95.00 per week	\$75.00 per week	\$85.00 per week

**ONE-TIME REGISTRATION FEE = \$50.00, plus the following for Sessions II, IV, VI, VIII & X:**

<b>Regular Camp 8am-5pm</b>	<b>Extended Day 7am-6pm</b>	<b>Sibling Regular Camp 8am-5pm</b>	<b>Sibling Extended Day 7am-6pm</b>
\$95.00 per week	\$105.00 per week	\$85.00 per week	\$95.00 per week



## **PARKS & RECREATION DEPARTMENT 2009 Summer Camp Program Information**

### **Sessions**

Session I: Fun with Food  
Session II (field trip): Fun with Food  
Session III: Summer Under the Sea  
Session IV (field trip): Summer Under the Sea  
Session V: Crime Scene Investigation  
Session VI (field trip): Crime Scene Investigation  
Session VII: Around the World  
Session VIII (field trip): Around the World  
Session IX: The Great Debaters  
Session X (field trip): The Great Debaters

### **Deadline for Registration**

Friday, June 5th  
Friday, June 12th  
Friday, June 19th  
Friday, June 26th  
Thursday, July 2nd  
Friday, July 10th  
Friday, July 17th  
Friday, July 24th  
Friday, July 31st  
Friday, August 7th

**Parent's Initial:**

### **Payment:**

No partial payments will be accepted. Camp fees cannot and will-not be pro-rated. **Checks are not accepted as payment.** We accept cash, credit or debit (Visa, MasterCard, Discover or American Express).

All parents are required to leave a valid credit card number and expiration date on file at the time of registration. This card may be used for any and all future camp sessions if your account has a balance or if funds are due. If a child is on-site and the credit card number on file is declined, the parent will be contacted and asked to pick up the child(ren) in question within two (2) hours of notification. If a child is on-site and camp fees have not been paid, this credit card number will be automatically charged along with a late fee, per child. A late fee of \$10.00 per child will be added to all camp fees if paid after the above listed deadlines.

If a parent does not wish to place a valid credit card number on file, a minimum deposit amount of \$105.00 per child will be required to be paid at the time of registration. This deposit will remain on file and pay for any late fees or unpaid camp registration/session fees. This deposit must remain on file during the length of time your child(ren) are enrolled in camp. If the deposit amount falls below the amount of \$105.00/child, an additional payment will be required to maintain your minimum household deposit balance. This deposit can be used as a credit for your child(s) last camp session or will be refunded to you within 30 days after August 14, 2009.

In order to register your child(ren) in camp by the above deadlines (the Friday before the next camp session begins), parents may make credit card payments over the phone by calling (281) 403-8637, Monday-Friday from 8:00am-5:00pm or in person here at the Community Center to avoid a late penalty. Please make note of the above registration deadlines.

**Parent's Initial:**



## **PARKS & RECREATION DEPARTMENT 2009 Summer Camp Program Information**

### **Refund Policy:**

No refunds unless camp is cancelled by Missouri City Parks & Recreation Department.

**Parent's Initial:** \_\_\_\_\_

### **Hours**

Camp Hours: 8:00 a.m. – 5:00 p.m.

Extended Day\*: 7:00 a.m. – 6:00 p.m.

### **How to register:**

1. Pick up a registration packet from the front desk of the Community Center or download the registration packet from the city's website at [www.missouricitytx.gov](http://www.missouricitytx.gov).
2. Bring completed packet to the Community Center Front Desk, Monday-Friday from 8:00am-5:00pm.
3. Full payment for at least one camp session + registration fee will be due upon receipt of registration materials (please see payment section on page 3). A paid registration fee cannot hold a spot in any one camp session.

### **Forms/What is needed to register (forms MUST be complete):**

- 1) Completed packet with parent/guardian initials in all required spaces - this includes a photo release/consent form, a travel waiver and release, swimming activity waiver, and a list of approved guardians that are able to pick up your child(ren).
- 2) SignMeUp Registration Form with valid credit card number and expiration date (include copy of parent's drivers license or state issued ID).
- 3) Birth certificate of children enrolling in camp (copies are accepted).

### **Drop-off and Pick-Up/Late Pick-Up Policy:**

Extended care drop off begins at 7:00am at the Community Center (camp will not open earlier than 7:00am). On the first day of camp, parents **must** be present at drop off to make sure all forms are completed. Children not enrolled in the "extended day" program should not arrive prior to 8:00am.

**A parent or guardian is required to come in and sign-in and sign-out their camper(s) EVERY DAY.** You are required to see that your child is under the supervision of a camp leader before you leave the premises. All parents and guardians are required to show their identification if asked. Please make sure to notify anyone attempting to pick up your child to bring their photo identification with them into the center. **There are no exceptions as safety is a priority!** **Parent's Initial:** \_\_\_\_\_

Extended care pick-up ends at 6:00pm. Late fees apply to those who arrive after 6:00pm. If you are going to be late, please call the Camp Director and let them know when to expect you\* (\*fees still apply). The fee is \$5.00 for the first fifteen minutes (6:01pm-6:15pm) and \$1.00 per minute thereafter. The late pick-up fee is due when you arrive to pick up your child; no exceptions.

**Parent's Initial:** \_\_\_\_\_



## **PARKS & RECREATION DEPARTMENT 2009 Summer Camp Program Information**

### **Breakfast and Lunch:**

Breakfast and lunch is the responsibility of the parent/guardian everyday unless a field trip or special activity provides the lunch (parents will be notified by camp memo). It is recommended that the food is placed in a refrigerated lunch box and the camper's name is legibly written on the outside. Odd numbered camp sessions (where no field trip takes place) will hold a pizza party on Friday. Parents will not be required to send lunch with their child on June 12, June 26, July 10, July 24, and August 7, unless their child does not want to eat the provided pizza lunch.

Parent's Initial: \_\_\_\_\_

### **Field Trips:**

Parents wishing to attend any field trips with camp will need a background check completed no less than two weeks prior to the trip. Please see the Camp Director for details. Parents are responsible for their own transportation and all costs associated with the field trip.

Parents will be asked to send money with children during certain trips. This money will cover the cost of an off-site lunch and/or additional activities not covered in camp session fees. The Camp Director and camp staff cannot be responsible for any funds brought to camp.

Transportation will be provided by Taking Kidz Places passenger vans. Field trips are subject to change at the discretion of the Camp Director.

Parent's Initial: \_\_\_\_\_

### **Movies:**

Every week, campers will attend the AMC Theater in Pearland (day of the week to be determined). The movie is covered by your camp session fee. Should your child wish to purchase any snacks at the concession stand you will need to send your child(ren) to camp with funds to cover the cost. The Camp Director and camp staff are not responsible for any funds brought to camp and will not be able to hold money for campers. Additional information will be discussed at the June 3<sup>rd</sup> "Parent Meeting".

Parent's Initial: \_\_\_\_\_

### **Daily Attire:**

Each camper will be provided one camp t-shirt. Additional t-shirts can be purchased through the Camp Director. Campers are expected to wear their camp t-shirt everyday for identification purposes. Campers must always wear closed-toed shoes. Campers should also be prepared for water-play at any given time. Please send a swimsuit and towel everyday in case the need arises.

Parent's Initial: \_\_\_\_\_

Please list t-shirt sizes here for each child enrolled in camp: \_\_\_\_\_

\_\_\_\_\_



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**Swimming:**

Campers will swim at the Stafford Municipal Pool (1355 Constitution – 281-499-5763) once a week, contingent on the weather. Additional details will be provided at the parent meeting on June 3<sup>rd</sup>.

Each child will be required to take a swim test on their first day of swimming given by a lifeguard employed by the City of Stafford. Please make sure to complete the attached “Activity Waiver” in order to alert the camp staff to your child(ren)’s swimming ability.

Campers will spend two hours at the pool so please make sure to send your child(ren) to camp with sunscreen and proper protection (hats, sunglasses, etc.).

Pool rules do not allow the use of personal floatation devices including floaties, however lifejackets are available.

If your child is not allowed in the water for any sort of swimming activity, please mark your choice clearly on the “Activity Waiver” sheet so that we can arrange an alternate activity. Children that do not wish to swim will remain at the pool complex with camp staff.

Parent’s Initial: \_\_\_\_\_

**Personal Property:**

Campers should not bring any personal items to camp such as Ipods, cell phones and electronics. This helps to alleviate disruptive behavior and reduces arguments. Camp staff is not responsible or liable for any lost, stolen or damaged property.

Parent’s Initial: \_\_\_\_\_

**Drop-In Visits:**

Parents and guardians are welcome to drop in unannounced at anytime during camp hours of operation. Photo ID will be required and you must be listed on the list of approved parents/guardians.

Parent’s Initial: \_\_\_\_\_

**Child Illness:**

Please make sure your emergency contact number on file is the best way to reach you in case you child(ren) becomes ill during camp hours. Please refrain from sending an ill camper(s) to camp to prevent the spread of that illness to other campers. If your child becomes ill, every attempt will be made to contact a parent/guardian to ask that the child be picked up from camp.

Parent’s Initial: \_\_\_\_\_

**Special Needs:**

Please make sure you alert the Camp Director and staff (in writing) of any special needs (diet, allergies, etc.) your child(ren) may have.

Parent’s Initial: \_\_\_\_\_



## **PARKS & RECREATION DEPARTMENT 2009 Summer Camp Program Information**

### **Medication:**

We do not employ a licensed medical professional therefore we will not administer any type of medication, including prescriptions and over-the-counter medications without a signed "Medication Dispensing Form." The medication must be marked with the child's name and in the original prescription bottle and cannot be expired in order to be consumed. A "medication dispensing form" can be picked up from camp staff in Room 210. **Parent's Initial:** \_\_\_\_\_

### **Safety:**

In the event of any incident or emergency, every attempt will be made to contact a parent/guardian and notify them of the situation. In the event of a medical emergency your child will be taken to the nearest hospital. An incident report will be completed immediately. In some cases, the parent/guardian will need to pick up the child as soon as possible in order to determine the severity of the injury and speak with the Camp Director to determine further action.

**Parent's Initial:** \_\_\_\_\_

### **Discipline and Guidance**

**First offense:** Child will receive verbal redirection

**Second offense:** Removal from activity until behavior improves

**Third offense:** Parent conference with the Camp Director

In the rare instance that a child has a serious discipline problem or habitually is disruptive or has physically aggressive behavior, we reserve the right to terminate the child's enrollment **without a refund** in camp session fees in order to guarantee the safety of other children in our care.

**Parent's Initial:** \_\_\_\_\_

### **Daily Schedule & Session Activities:**

The daily schedule & session activities will be available from the Camp Director one week before the start of camp.

### **Nap/Rest**

Children will have an opportunity to rest/nap immediately following lunch. Children will need to supply their own blanket and pillow and take them home daily to be sanitized.

**Parent's Initial:** \_\_\_\_\_

### **Notices**

Important camp notices and memos will be posted on the entrance door to camp and on the board located near the daily sign-in sheet. Your child(ren)'s participation in this program is voluntary and you may terminate at anytime. The program is offered for recreational purposes only; we are not a state licensed childcare facility.

**Parent's Initial:** \_\_\_\_\_

**Failure to abide by any of the mentioned policies in this document will result in refusal of registration in future camp session.**





**PARKS & RECREATION DEPARTMENT**  
**2009 Summer Camp Program Information**

**For General Camp Questions:** please call (832) 289-5663.

**Registration Questions:** please call (281) 403-8644 or (281) 403-8637.

**Primary Guardian Name (printed):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Primary Guardian Name (signature):** \_\_\_\_\_

**SIGN ME UP REGISTRATION FORM**  
**PLEASE PRINT AND FILL OUT COMPLETELY**

**Name of Parent** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Home Phone Number** ( ) \_\_\_\_\_ **WK:** ( ) \_\_\_\_\_ **Emergency/Cell:** ( ) \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

<b>Child(ren)'s Name</b>	<b>D.O.B. (Required)</b>	<b>Gender</b>	<b>Camp Session Name</b>	<b>Session #</b>	<b>Activity Starting Date</b>	<b>Fee</b>
1.						
2.						
3.						
4.						

I hereby certify, with the distinct understanding that the CITY OF MISSOURI CITY, TEXAS and its employees, agents and anyone acting for the CITY OF MISSOURI CITY, TEXAS shall not be held responsible of liability for any accident or injury (including damages resulting there from), or for the treatment of the same, whether or not assuming by reason of it's negligence or the negligence of doctors or physicians or other personnel treating said injury. In emergency situation, while not assuming the obligation to do so, every effort will be made to care for such emergencies as may be deemed necessary in the discretion of the person or persons representing the CITY. In the event of medical attention should become necessary, I, the undersigned individual, parent, or guardian, hereby authorize the representative of the CITY to obtain first aid and medical attention as in their discretion may seem necessary. In the event of injury, I or my parents will assume responsibility for payments of all costs arising directly or indirectly from said injury including reimbursement of any amounts, which may be paid by the CITY or its representatives.

I have read and understand the above waiver and sign it voluntarily.

**Customer's Signature:** \_\_\_\_\_  
(Name) \_\_\_\_\_ (Date) \_\_\_\_\_

**Method of Payment**  
Cash \_\_\_\_\_ Check \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_ MO \_\_\_\_\_

**Credit Card #** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

**Employee accepting registration:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Receipt #** \_\_\_\_\_ **Total \$** \_\_\_\_\_





**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**USE OF PHOTOGRAPHS CONSENT/RELEASE**

WHEREAS, the City is desirous of utilizing photographs of individuals in various ways including, but not limited to, promotional materials, advertisements, flyers, calendars, the City website and other publications relating to and drawing attention to the CITY area;

WHEREAS, the City desires to take certain photographs of the Consenter for such purposes and has requested the Consenter's consent (through the Consenter's guardian if Consenter is a minor) to the taking of the photographs and for the unrestricted use and utilization of the photographs for current and future City purposes, including, but not limited to, those uses listed above; and

WHEREAS, the Consenter consents and does not object to the taking of the photographs and utilizing them for City purposes.

NOW THEREFORE, the Consenter hereby consents as follows:

1. Consenter consents to the taking of various photographs of the Consenter by the City and the City's desired use and utilization of the photographs taken. To the fullest extent possible under law, Consenter releases the City with regard to the photographs and their use.
2. Consenter recognizes and agrees that he/she will not receive compensation or any other benefit whatsoever as a result of this Consent and the City's use of the photographs and is freely allowing the City to use the photographs which include the Consenter's likeness.
3. Consenter recognizes and agrees that any photographs taken pursuant to this Consent are exclusively owned by the City and that Consenter has no interest in the photographs whatsoever.

**CHLD(REN)'S NAME**

**CONSENTER'S LEGAL  
GUARDIAN**

**PLEASE PRINT**

**PLEASE PRINT**

**SIGNATURE**

**DATE**



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**Missouri City Parks and Recreation  
Field Trip Waiver and Release Form  
Valid for Summer Camp Field Trips (June 2009 through August 2009)**

Method of Transportation: \_\_\_\_\_ Taking Kidz Places Passenger Van(s)\_\_\_\_\_

**SPECIAL NOTICE/INSTRUCTION:**

\_\_\_\_\_

---

***Permission to Participate***

By signing this form, I/we \_\_\_\_\_ certify that I/we give  
permission for \_\_\_\_\_  
\_\_\_\_\_ to go on this field trip.

**Child(ren)'s Name**

I hereby certify, with the distinct understanding that the CITY OF MISSOURI CITY, TEXAS and its employees, agents and anyone acting for the CITY OF MISSOURI CITY, TEXAS shall not be held responsible of liability for any accident or injury (including damages resulting therefrom), or for the treatment of the same, whether or not assuming by reason of it's negligence or the negligence of doctors or physicians or other personnel treating said injury. In emergency situation, while not assuming the obligation to do so, every effort will be made to care for such emergencies as may be deemed necessary in the discretion of the person or persons representing the CITY OF MISSOURI CITY, TEXAS. In the event medical attention should become necessary, I, the undersigned parent or guardian, hereby authorize the representatives of the CITY to obtain first aid and medical attention as in their discretion may seem necessary. In the event of injury, parents will assume responsibility for payments of all cost arising directly or indirectly from said injury including reimbursement of any amounts, which may be paid by the CITY OF MISSOURI CITY, TEXAS or its representatives.

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Date**

***Emergency Information***

\_\_\_\_\_  
**Parent/Guardian Name**

\_\_\_\_\_  
**Phone Numbers**

\_\_\_\_\_  
**Medical Insurance Carrier**

\_\_\_\_\_  
**Policy Number**

\_\_\_\_\_  
**Doctor's Name/Phone**

\_\_\_\_\_  
**Preferred Hospital**



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**ACTIVITY WAIVER**

Although Taking Kidz Places has taken reasonable steps to minimize risks for participants, I/we recognize that certain inherent risks are involved in activities, including (but not restricted to) **swimming**, hiking, wilderness exploration, physical games, etc. Activities may result in exposure to plants, animals, insects, allergies, and associated diseases, and include the possibility of slips, falls, scrapes, etc, which could result in scratches, bruises, sprains, fractures, concussions, or even more life threatening hazards. I/we are aware of the risks to participants these activities entail, that this list is not complete and that other unknown or unanticipated risks may result in injury or death.

I realize that my child's in this activity is completely voluntary. I/we assume full responsibility for myself and my children for bodily injury, death and loss of personal property and expenses thereof as a result of those inherent risks and dangers and of my own negligence in participating in these activities.

I have read, understood, and accepted the terms and conditions of this document and acknowledge this agreement as legally binding upon myself, heirs, assigns, estate, and all members of my family, including minors

Emergency Contact Phone number (home and work):

**Home**

**Work**

Please check your child's **swimming** ability (we will always have a certified lifeguard at the pool during **swimming** activities):

CHECK THE ONE APPLIES TO YOUR CHILD(REN) AND INSERT NAME:

- ☐ My child is allowed to swim in deep water: **Name of Child(ren):**
- ☐ My child is only allowed to swim in shallow water. **Name of Child(ren):**
- ☐ My child is not allowed to get in the pool and I would prefer an alternate activity for my child.  
**Name of Child(ren):**

**Please let your child know what his/her **swimming** option will be.**

**Parent Printed Name:**

**Parent Signature**

**Date:**



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**LIST OF APPROVED PARENTS/GUARDIANS**

ALL PARENTS AND GUARDIANS MUST CARRY PHOTO I.D. AND PRESENT TO CAMP STAFF IF ASKED. YOU MAY ADD NAMES ONTO THIS LIST AT ANY TIME. A CHILD WILL NOT BE RELEASED TO ANYONE NOT LISTED BELOW.

**CHILD(REN) NAMES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIST NAME AND DATE OF BIRTH**

1.	_____	D.O.B.
2.	_____	D.O.B.
3.	_____	D.O.B.
4.	_____	D.O.B.
5.	_____	D.O.B.

Any additional comments/notes:



**PARKS & RECREATION DEPARTMENT  
2009 Summer Camp Program Information**

**Registration Checklist**

Please make sure all of these items are completed before registering.

- **Completed Registration Packet (all initials)**
- **Child(ren)'s Birth Certificate**
- **Primary parent/guardian driver's license copy**
- **Valid credit card number/expiration date or deposit on file**